COCONINO COUNTY

MOBILE HOME REHABILITATION PERMIT APPLICATION

Coconino County Arizona Date _____ Department of Community Development Permit No. 2500 N. Fort Valley Rd., Bldg. 1, Flagstaff, AZ 86001-1287 Plan Check No.____ Phone (928) 226-2700 Fax (928) 226-2701 Web Site: www.coconino.az.gov SUBDIVISION NAME AND/OR PARCEL NUMBER LOT# UNIT# STREET NAME AND ADDRESS MAILING ADDRESS: (CITY, STATE, ZIP CODE) OWNER: PHONE: CONTRACTOR: LICENSE # COMPLETE ADDRESS: PHONE: PLAN CHECK BY: TOTAL FEES; SQ. FT. ISSUED BY: MANUFACTURER: YEAR: SERIAL NO: _____ SIZE ______ X _____ NO. OF BEDROOMS: _____ SEPTIC PERMIT NO: _____ SUMMARY OF WORK:_______ GROUP ZONE TYPE SETBACKS: FRONT: SIDE: REAR: Restrictive covenants (deed restrictions) cannot be enforced by Coconino County Signature: Date: _____